Major Donor and COMMITTEE STATEMENT **Independent Expenditure Committee** Type or print in ink. Date Stamp CALIFORNIA **Campaign Statement FORM** (Government Code Sections 84200-84216.5) Statement covers period Date of election if applicable: 1/5 ☑ Amendment (Month, Day, Year) For Official Use Only 01/01/2009 from 05/21/2009 05/19/2009 SEE INSTRUCTIONS ON REVERSE through 3. Summary 1. Name and Address Of Filer NAME OF FILER (Amounts may be rounded to whole dollars.) (Include name(s) of all affiliated entities whose contributions are included in this statement.) 1. Expenditures and contributions DENTISTS INSURANCE COMPANY (TDIC), THE (including loans) of \$100 or more 113500.00 made this period. (Part 5.)\$ MAILING ADDRESS (NO. AND STREET) 2. Unitemized expenditures and contributions (including loans) under CITY STATE ZIP CODE 0.00 \$100 made this period..... \$ -**SACRAMENTO** 958140000 3. Total expenditures and contributions RESPONSIBLE OFFICER AREA CODE/DAYTIME PHONE 113500.00 (If filer is other than an individual) made this period. (Add Lines 1 + 2.)SUBTOTAL \$ -Jim Richardson 4. Total expenditures and contributions made from prior statement. (Enter 2. Nature and Interests of Filer (Complete each applicable section.) amount from Line 5 of last statement A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS filed. If this is the first statement for 0.00 the calendar year, enter zero.)\$ -NAME OF EMPLOYER/BUSINESS **BUSINESS INTERESTS** 5. Total expenditures and contributions (including loans) made since ADDRESS OF EMPLOYER/BUSINESS January 1 of the current calendar year. A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS 4. Verification **ENGAGED** I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information Professional liability insurance for dentists contained herein is true and complete. I certify under penalty of perjury under ☐ A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS the laws of the State of California that the foregoing is true and correct. Bv Jim Richardson 07/30/2009 Executed on _ A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE SIGNATURE OF INDIVIDUAL DONOR OR DATE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period		CALIFORNIA	161
from	01/01/2009	FORM	401
th managet	05/21/2009	2/5	
through	00/21/2000		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DENTISTS INSURANCE COMPANY (TDIC), THE

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made (If more space is needed, use additional copies of this page for continuation sheets.)

DESCRIPTION OF CANDIDATE AND OFFICE, **CUMULATIVE AMOUNT** NAME AND ADDRESS OF PAYEE AMOUNT THIS DATE TYPE OF PAYMENT **PAYMENT** MEASURE AND JURISDICTION. **RELATIVE TO THIS** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **PERIOD** (IF OTHER THAN MONETARY OR COMMITTEE CANDIDATE, MEASURE, CONTRIBUTION OR LOAN) OR COMMITTEE **Budget Related Initiatives** 05/08/2009 X Monetary 100000.00 Calendar Year **Budget Reform Now** Contribution Loan 100000.00 San Rafael 94901 Non-Monetary Other CA Contribution ID: Reference No: 1 NO: 1A - F Independent 0.00 X Support Oppose Expenditure 02/09/2009 6500.00 Calendar Year FAIR PAC X Monetary Contribution 6500.00 Loan Non-Monetary 95814 Other Sacramento CA Contribution NO. ID: 1311499 Reference No: Independent 0.00 Support Oppose Expenditure 02/17/2009 1000.00 Calendar Year Reelect Joan Buchanan For Assembly 2010 X Monetary Joan Buchanan Contribution State Assembly Person 1000.00 Loan Assembly District Non-Monetary Other 95814 Sacramento Contribution Reference No: NO: 15 ID: 1314036 Independent 0.00 X Support Oppose Expenditure 02/17/2009 1000.00 Calendar Year Alyson Huber For Assembly 2010 X Monetary Alyson Huber Contribution State Assembly Person Loan 1000.00 Assembly District Non-Monetary Other 95814 Sacramento Contribution ID: 1314155 NO: 10 Reference No: Independent 0.00 X Support Oppose Expenditure

FPPC From 461 (8/99)

For Technical Assistance: 916/322-5660

SUBTOTAL \$

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statem	Statement covers period CALIFORNIA		161
from	01/01/2009	FORM	461
through .	05/21/2009	3/5	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DENTISTS INSURANCE COMPANY (TDIC), THE

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made (If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
02/17/2009	Solorio For Assembly 2010 Sacramento CA 95814 ID: 1314073 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Jose Solorio State Assembly Person Assembly District NO: 69 Support Oppose	1000.00	\$Other
02/17/2009	Gilmore For Assembly 2008 Fresno CA 93721 ID: 1293625 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Danny Gilmore State Assembly Person Assembly District NO: 30 X Support Oppose	1000.00	Calendar Year \$
02/17/2009	Ron Calderon For Senate 2010 Sacramento CA 95814 ID: 1292792 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Ron Calderon State Senator Senate District NO: 30 Support Oppose	1000.00	\$ 1000.00 Other
03/31/2009	Fuentes For Assembly 2010 Sacramento CA 95814 ID: 1313818 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Felipe Fuentes State Assembly Person Assembly District NO: 39 Support Oppose	1000.00	\$ 1000.00 Other \$ 0.00

FPPC From 461 (8/99)

For Technical Assistance: 916/322-5660

SUBTOTAL \$

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND MAJOR DONOR COMMITTEE STATEMENT

Statem	ent covers period	CALIFORNIA	161
from	01/01/2009	FORM	401
through	05/21/2009	4/5	
unougn	-		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DENTISTS INSURANCE COMPANY (TDIC), THE

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
03/31/2009	Jerry Hill For Assembly 2010 San Bruno CA 94066 ID: 1313437 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Jerry Hill State Assembly Person Assembly District NO: 19 Support Oppose	1000.00	\$ 1000.00 Other \$ 0.00

SUBTOTAL \$

113500.00

TEXT ANNOTATION

PAGE 2

Schedule F461P5 R

Reference No: 1